DOCUMENT RESUME

ED 470 020 EA 032 032

AUTHOR	Whelley, Pete; Cash, Gene; Bryson, Dixie
TITLE	The ABCs of Children's Mental Health.
INSTITUTION	National Association of Elementary School Principals, Alexandria, VA.
ISSN	ISSN-0735-0031
PUB DATE	2002-00-00
NOTE	6p.; Published quarterly.
AVAILABLE FROM	National Association of Elementary School Principals, 1615 Duke Street, Alexandria, VA 22314 ($2.50). Tel: 703-684-3345; Tel: 800-386-2377 (Toll Free); Web site: http://www.naesp.org.
PUB TYPE	Collected Works - Serials (022) -- Guides - Non-Classroom (055) -- Reports - Descriptive (141)
JOURNAL CIT	Here's How; v21 n1 Fall 2002
EDRS PRICE	EDRS Price MF01/PC01 Plus Postage.
DESCRIPTORS	Adjustment (to Environment); Elementary Secondary Education; *Mental Disorders; *Mental Health; Mental Health Programs; *School Responsibility; *Student Needs; Wellness

ABSTRACT

The U.S. Surgeon General's 2000 Report on Children's Mental Health estimates that one in five children and adolescents will experience a significant mental-health problem during their school years. While the family is the primary source of support for a child's mental health, the increased stress and fracturing of today's life make it imperative that schools work with parents. With the help of school-based mental-health professionals, principals can develop and initiate a number of strategies designed to protect children by establishing their long-term capacity for positive behavior, social competency, academic achievement, and emotional well-being. Such strategies include fostering a sense of belonging, helping children adapt to change, accentuating the positive, and strengthening children's resiliency. A list of disorder symptoms is presented so educators can contact a mental-health professional should these signs occur. It is recommended that educators educate themselves on types and symptoms of mental-health problems, develop procedures for addressing potential problems, and utilize community mental-health resources and provide their names and numbers to parents. The brief concludes with one principal's description of her proactive approach to promoting students' psychological well-being, "You Do Whatever It Takes" (DeLanna Lacy). (RT)

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Here's HOW

NATIONAL ASSOCIATION OF ELEMENTARY SCHOOL PRINCIPALS

VOLUME 21, NUMBER 1
FALL 2002

The *ABCs* of Children's Mental Health

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The *ABCs* of Children's Mental Health

Pete Whelley, Gene Cash, and Dixie Bryson

The U.S. Surgeon General's 2000 *Report on Children's Mental Health* estimates that one in five children and adolescents will experience a significant mental health problem during their school years. While the severity may vary, approximately 70 percent of those who need treatment will not receive appropriate mental health services.

Mental health concerns can develop as early as infancy and, like other aspects of child development, the earlier they are addressed, the better. Failure to do so eventually can lead to poor academic performance, behavior problems, school violence, dropping out, substance abuse, special education referral, suicide, and criminal activity.

Although mental health has been viewed historically through the lens of mental illness (*e.g.*, depression or schizophrenia), we have come to recognize that good mental health is not simply the absence of illness, but also the possession of skills necessary to cope with life's challenges. Children come to school each day with more than their backpacks. They bring a myriad of factors that shape their learning and development, from family issues, health, and culture to behavior, learning style, and abilities. Virtually all are related in some way to their mental health.

Schools are excellent places to promote good mental health. For while the family is the primary source of support for a child's mental health, the increased stress and fracturing of today's life make it imperative that schools work with parents. Children spend a significant amount of time at school and as trained and caring adults educators have the opportunity to observe and address their mental health needs. Doing so effectively requires both reinforcement of children's mental health strengths and appropriately responding to the needs of children suffering from acute mental health disorders.

Protective Strategies

With the help of school-based mental health professionals, principals can develop and initiate a number of strategies designed to protect children by establishing their long-term capacity for positive behavior, social competency, academic achievement, and emotional well-being.

Foster a sense of belonging. Young children's strongest bond is to their parents, and a primary objective in the early years of elementary school is to extend that feeling of connection to school. Studies have shown that a sense of belonging in elementary school decreases incidents of risky behavior even into young adulthood. For principals, building this sense of belonging requires personal interaction. Welcoming children when they arrive, greeting them by name in the hallways, and putting up a bulletin board in the hall for students to share important events reinforces their perception that they are valued members of the school community.

It also is important for principals to establish a positive relationship with parents. Principals should make an effort to meet every new student and their parents at the beginning of the year, hold monthly parent chats, include personal messages in school newsletters, encourage parents to volunteer, and always keep their office doors open.

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Help children adapt to change. Routine is important to young children. Regular activities, such as checking in, putting their belongings in their cubbies, and eating lunch together lend structure to their environment and help establish their sense of competence and belonging.

Equally important, though, is the ability to adapt to change. Some children react negatively to change, particularly if they are experiencing emotional stress, and may need help adjusting to even such small changes as a substitute teacher or a new seating arrangement. Educators can minimize the anxiety associated with change by giving students advance warning and, if possible, allowing them to take part in the change, such as discussing the rearrangement of classroom furniture. By identifying the things that have not changed and focusing on their competencies, you can help children maintain a sense of control and stability.

Accentuate the positive. We can help children develop mentally healthy behaviors by recognizing positive acts with praise, such as when children exhibit self-control when angry, raise their hands instead of calling out, or show compassion for a peer. In some cases, it may be necessary to devise situations where children can do the right thing and then praise them for it.

When a child is referred to the principal for disciplinary action, try to point out something positive about the child before addressing the problem behavior. Acknowledge the validity of the feelings that may underlie the child's actions. Help the child identify something he or she does well and, if possible, link that skill to an appropriate task that can be performed in the office or other supervised setting during the detention period.

Strengthen children's resiliency. Research shows that children with similar risk factors may have different outcomes based on their resiliency—the ability to bounce back from defeat by resetting one's compass, redefining goals, and continuing on course. Educators can help children develop and strengthen resiliency by taking on the role of an encourager who acknowledges the significance of a defeat but does not allow it to result in a sense of personal failure. The key is to help children see the "big picture" and to refocus on their ability to try again or to find alternative means of accomplishing their goals.

Linked to resiliency is children's need to believe that accomplishment comes through their own actions. This is often referred to as self-efficacy or self-determination. Children who lack this ability may be overly dependent or tend not to accept responsibility for their actions. We can help children learn to define a goal, identify useful strategies and personal resources, assess their progress, determine a realistic time period for success, and judge when they need help. It is appropriate for children to seek help once they have exhausted their own capacity or recognize that the situation is beyond the scope of their competency.

Addressing Mental Health Problems

Building protective factors like these into the learning environment gives most children the foundation they need to attain and maintain good mental health. But we also need to recognize and respond to children's more acute mental health needs. While schools that serve high-risk communities or that have experienced a traumatic event may see higher rates of mental health problems, elementary schools across the board are experiencing noticeable increases in such areas as bipolar disorder, obsessive-compulsive disorder (OCD), impulse disorder, depression, oppositional-defiance disorder (a precursor to conduct disorder in older children), and ADHD.

Educators need to know the signs of these disorders and when to get help (*see box*). Doing so can be tricky with young children because they often cannot articulate what is bothering them, and many indicators also can mirror normal developmental behaviors. Moreover, symptoms can be similar for some disorders. For instance, repetitive actions (folding and unfolding a paper), signs of anxiety (nail-biting or picking at skin), and extreme reluctance to try something new are seen in both OCD and Asperger's Syndrome, a mild version of autism. Identifying depression in young children also can be difficult because the symptoms are often not

Identifying Mental Health Problems

Symptoms can include changes in habits, withdrawal, decreased social and academic functioning, erratic or changed behavior, and increased physical complaints. A mental health professional should be contacted if symptoms:

- Are new or changed in intensity, frequency, or presentation;
- Continue for a significant period of time;
- Do not improve with combined parental and classroom interventions;
- Interfere with a student's social and academic function;
- Routinely disrupt the classroom;
- Are beyond the student's control; or
- Present a danger to the student or others.

lethargy and passivity but anxiety, fear, acting out, aggressiveness, and unpredictability.

Because of complexities like these, only a trained mental health professional can diagnose a serious disorder. The school psychologist or counselor should be contacted if a child does not respond to basic interventions and is having trouble functioning academically or socially. Principals should be informed of—and ideally involved in—any situation that reaches this stage. They can help staff take appropriate steps by following a few simple guidelines.

Educate your staff on types and symptoms of mental health problems through fact sheets, training, and access to school mental health professionals. School psychologists, counselors, and social workers can provide teacher and parent training as well as classroom observations and feedback.

Develop procedures for addressing potential problems. Suggest that teachers initially work with parents while using basic classroom intervention strategies, and that they have regular meetings with teachers to identify children with difficulties. Teachers should not attempt to diagnose problems. If problems persist, parents should be notified when and why the school psychologist is being brought in, and invited to participate in meetings, evaluations, and recommendations for intervention strategies and additional resources.

Utilize community mental health resources and provide their names and numbers to parents. Establish a crisis response team that includes school and community mental health professionals and offers mental health prevention, intervention, and post-intervention services. □

The Principal's Perspective

You Do Whatever It Takes

DeLanna Lacy

As a principal, I believe I have a responsibility to not just take care of my students' academic needs but also to ensure support for their overall well-being. Some students enter our school building each morning hungry, dirty, and unloved. We cannot teach these children how to add or subtract until their physical and mental health needs are met.

My staff and I take care of our students on many levels that include providing breakfast or clean clothes, moving a family from tents to a house, or even paying electric bills—whatever it takes to make sure that they are on equal ground to learn with their classmates. Sometimes the most important thing I can do is give children a hug or pat on the back and tell them that I'm glad that they are in school today.

I also make a concerted effort to reach out to parents. I encourage them to tell me if their child is having a problem. I reassure them that asking for help is okay and that the school either has resources or can help them find resources. I rely on my school psychologists to work with parents and teachers in identifying and suggesting interventions for specific mental health concerns of children, and to recommend and implement school-wide prevention programs.

For the past two years, we have been using a program that addresses behavior management, social skills, and school safety. The program emphasizes teaching students the positive behaviors we want them to demonstrate, as opposed to simply disciplining them for bad behavior. It involves every adult in the building, as well as parents. And it really works! It's the neatest thing in the world to overhear a couple of kindergarten kids in the hall say, "We'd better stop and think"—a catch phrase for our program. Discipline referrals have decreased by around 35 to 45 percent this past year. Now, when students are referred to me, instead of just administering discipline I help them solve their problems, using the pro-social skills they have learned.

Supporting the mental health needs of our students has not only improved their ability to learn, solve problems, and get along with others. It has made our teachers more effective educators and my job as principal more enjoyable. □

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Web Resources

The National Association of School Psychologists provides a list of exemplary mental health programs.
www.naspcenter.org/model.html

Success in School/Skills for Life is an online resource kit that contains electronic handouts for parents on a variety of mental health and learning topics that schools can download for free.
www.naspcenter.org/resourcekit/index.html

The *Report of the Surgeon General's Conference on Children's Mental Health* is available online.
www.surgeongeneral.gov/topics/cmh/childreport.htm

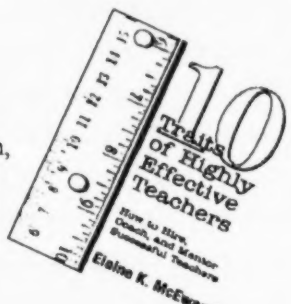
The Association for Conflict Resolution lists resources and support for conflict resolution programs.
www.acresolution.org/research.nsf/key/Sec-Ed

Here's How (ISSN 0735-0031) is published four times during the school year by the National Association of Elementary School Principals. Rebecca J. Kesner, editor. Candice Johnson, production editor. Single copies: $2.50; bulk orders (10 or more): $2.00 each. Virginia residents add 4.5% sales tax. Specify date and title of issue when ordering. Checks payable to NAESP must accompany order. Send to NAESP, National Principals Resource Center, 1615 Duke Street, Alexandria, Virginia 22314-3483.

10 Traits of Highly Effective Teachers:

How to Hire, Coach, and Mentor Successful Teachers

by Elaine K. McEwan



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